

Prejudice in the emergency room

August 24 2017, by Natasha Strydhorst



Esther Choo, M.D. '01, wrote a Twitter thread that has brought national attention to racism in medicine.

Every so often—a few times a year—a patient at Oregon Health and Science University (OHSU) hospital in Portland refuses treatment in the emergency department from Esther Choo, M.D. '01, M.P.H. It's not because they consider her 15 years' medical practice too paltry, or her School of Medicine degree insufficient—but because she is not white.



"It's one of those things that you're never prepared for," said Choo, whose parents emigrated from Korea in the 1960s. "Nobody, at any point, has said, 'Oh, by the way: you're a woman and you're a physician of color; you probably will have experiences like this." So Choo began that conversation with a Twitter thread the Sunday after the white supremacist rally on August 12 in Charlottesville, Va., that ended in violence and with the death of Heather Heyer when a car allegedly driven by a neo-Nazi plowed into a crowd of counter-protesters. In a matter of days, the thread had been retweeted more than 25,000 times (including by Chelsea Clinton and the physician-writer Atul Gawande, M.D.) and garnered more than 2,000 comments. The attention led to Choo's appearance on CNN, where she discussed the issue of racism when it comes to patient care. Those patients who refused her capable care, Choo said, either chose to be treated by a white intern over the experienced doctor or walked, untreated, out of the emergency room.

"Breathtaking, isn't it?" Choo tweeted, "To be so wedded to your theory of white superiority, that you will bet your life on it, even in the face of clear evidence to the contrary?" That evidence could hardly be clearer: in addition to her 12 years of post-residency practice, Choo has her degree from the School of Medicine, her residency at Boston Medical Center, and work as an associate professor and attending physician at Brown University under her belt. She's now an associate professor at OHSU, where, in addition to her clinical duties, she studies health disparities, substance abuse disorders, and gender bias. She also writes and serves on the advisory board for FeminEM, a resource for women working in emergency medicine.

Her family's story is a classic immigrant tale. Her parents came to the United States so her father could study engineering at Michigan State University. After receiving his doctorate, he went to work as an aerospace engineer for NASA in Cleveland, while her mother owned a home cleaning service. They became citizens and raised three



children—Esther's two brothers are a biology teacher and a management consultant. Before coming to the school of medicine, Choo graduated from Yale College with a degree in English language and literature.

"It took me a long time to get to where I am now, where I don't internalize it at all," Choo said of her efforts to deal with racism at work. "But when you're a younger physician and you're still developing your knowledge base, there are so many doubts that you have. So when you encounter someone who looks at you and finds something wrong that's so personal to you—that cannot be separated from you—it just creeps into any available areas of insecurity. And somehow you walk away feeling less confident as a physician, because this person is questioning your legitimacy to be there."

Choo's experience is not unique. Many of the thousands of replies to her thread related similar experiences, an outpouring that raises concerns. An article last year in the *New England Journal of Medicine* discussed how physicians might deal with racist patients, and in December OHSU released what Choo called a prescient statement advising patients that hate speech and bigotry will not be tolerated—and that requests for a specific physician based solely on race will not be honored.

"How do we improve the multiculturalism and the diversity of our physician workforce?" Choo said. "It's really hard if you're presenting some subsets of the physician work force with a harder road to travel."

Nancy R. Angoff, M.P.H. '81 M.D. '90, HS '93, associate dean for student affairs, who recalled seeing the qualities of compassionate care and calm leadership in Choo as a medical student, noted that the issue is a pressing one. "More and more, we're looking at that as a form of mistreatment that our medical students face, that our trainees face, that we as an institution need to take seriously," she said. "We need to foster an environment in which we respect each other."



"Hospitals are not selective institutions—we treat everybody who walks in the door," Choo said. "We are really thrown together—pretty intimately—with our patients, so we're going to encounter a wide variety of opinions, and some of them will be extreme intolerance. It's one thing to view it from across the country or on TV, and it's another thing to have it in your workplace and up in your face."

Some refuse to believe that Choo's experience is genuine. To the doubters, Choo is gracious: "It's a hard reality to accept—it shows the darker side of human nature," she said. Injecting a positive note into that darker reality, Choo revealed in her Twitter thread what gives her hope: "A few get uncomfortable and apologize in the same breath they refuse to let me treat them," she wrote. "You see, it's a hell of a hard thing to maintain that level of hate face to face."

Provided by Yale University

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